

CANDIDATE / OFFICEHOLDER CAMPAIGN FINANCE REPORT

FORM C/OH COVER SHEET PG 1

The C/OH INSTRUCTION GUIDE explains how to complete this form.

1 ACCOUNT #
(Ethics Commission filers)

2 Total pages filed:

3 CANDIDATE /
OFFICEHOLDER
NAME

TITLE FIRST MI
MAYOR EDWARD
NICKNAME LAST SUFFIX
GARZA

OFFICE USE ONLY

Date Received

4 CANDIDATE /
OFFICEHOLDER
ADDRESS

ADDRESS / PO BOX; APT / SUITE #; CITY; STATE; ZIP CODE
P. O. Box 120003, San Antonio, TX 78212

☐ Change of Address

Date Hand-delivered or Date Postmarked

5 CAMPAIGN
TREASURER
NAME

TITLE FIRST MI
Mrs. Edith
NICKNAME LAST SUFFIX
McAllister

Receipt #

Amount

Date Processed

Date Imaged

6 CAMPAIGN
TREASURER
ADDRESS
(Residence or business)

STREET ADDRESS (NO PO BOX PLEASE); APT / SUITE #; CITY; STATE; ZIP CODE
203 Terrell Road, San Antonio, TX 78209

7 CAMPAIGN
TREASURER
PHONE

AREA CODE PHONE NUMBER EXTENSION
(210) 826-1005

8 REPORT TYPE

☐ January 15 ☐ 30th day before election ☐ Runoff ☐ 15th day after campaign treasurer appointment (officeholder only)
☐ July 15 ☐ 8th day before election ☐ Exceeded \$500 limit ☐ Final report (Attach C/OH - FR)

9 PERIOD
COVERED

Month Day Year Month Day Year
April / 25 / 2003 THROUGH June / 30 / 2003

10 ELECTION

ELECTION DATE
Month Day Year
5 / 3 / 2003

ELECTION TYPE

☐ Primary ☐ Runoff ☐ General ☒ Special

City Election

11 OFFICE

OFFICE HELD (if any)

Mayor

12 OFFICE SOUGHT (if known)

Mayor

13 NOTICE
OF DIRECT
CAMPAIGN
EXPENDITURE
BY OTHER
INDIVIDUALS

.. Direct campaign expenditures are campaign expenditures made by others without the candidate's prior consent or approval. Candidates are required to disclose this information only if they receive notification of the direct campaign expenditure. ..

Name

Address / PO Box; Apt. / Suite #; City; State; Zip Code

☐ additional pages

GO TO PAGE 2

CANDIDATE / OFFICEHOLDER REPORT: SUPPORT & TOTALS

**FORM C/OH
COVER SHEET PG 2**

14 C/OH NAME

Mayor Ed Garza

15 ACCOUNT # (Ethics Commission filers)

16 NOTICE
FROM
POLITICAL
COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

☐ GENERAL☐ SPECIFIC

COMMITTEE NAME

COMMITTEE ADDRESS

COMMITTEE CAMPAIGN TREASURER NAME

COMMITTEE CAMPAIGN TREASURER ADDRESS

☐ additional pages17 NO REPORTABLE
ACTIVITY

☐ Check here if no reportable activity occurred during this reporting period. (Sign affidavit below and submit pages 1 and 2 only.)

18 CONTRIBUTION
TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED

\$ Itemized

2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)

\$ 16,150.00

EXPENDITURE
TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED

\$ Itemized

4. TOTAL POLITICAL EXPENDITURES

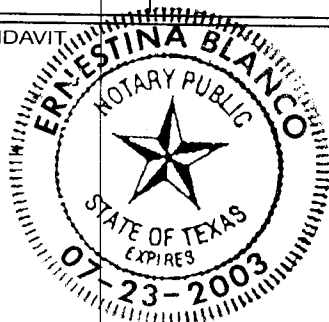
\$ 44,416.25

OUTSTANDING
LOAN TOTALS

5. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD

\$ 0

19 AFFIDAVIT



AFFIX NOTARY STAMP / SEAL ABOVE

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.

Ed Garza

Signature of Candidate or Officeholder

Sworn to and subscribed before me, by the said Edward D. Garza, this the 15th day of July, 20 03, to certify which, witness my hand and seal of office.

Signature of officer administering oath

Printed name of officer administering oath

Title of officer administering oath

**POLITICAL CONTRIBUTIONS
OTHER THAN PLEDGES OR LOANS****SCHEDULE A1**(FOR FORMS C/OH, C/OH-SS, SC-C/OH,
SC-SPAC, SPAC, & SPAC-SS)

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages this Schedule A1:

5

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

3/26/03

5 Full name of contributor

☐ out-of-state PAC (ID#)

Hugo Gutierrez

6 Contributor address; City; State; Zip Code

P O Box 3128, Houston, TX 77253

7 Amount of
contribution (\$)

250.00

8 In-kind contribution
description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

3/27/03

Full name of contributor

☐ out-of-state PAC (ID#)

Mark E. Watson Jr.

Contributor address; City; State; Zip Code

P O Box 6886, San Antonio, TX 78209

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

2/27/03

Full name of contributor

☐ out-of-state PAC (ID#)

Charles E. Amato

Contributor address; City; State; Zip Code

501 Terrell Road, San Antonio, TX 78209

Amount of
contribution (\$)

500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

3/26/03

Full name of contributor

☐ out-of-state PAC (ID#)

Edward G. Steves

Contributor address; City; State; Zip Code

P O Box 1866, San Antonio, TX 78297

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

3/27/03

Full name of contributor

☐ out-of-state PAC (ID#)

Mark E. Watson III

Contributor address; City; State; Zip Code

P O Box 6887, San Antonio, TX 78209

Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK
JUL 15 PM 2:51

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1

(FOR FORMS C/OH, C/OH-SS, SC-C/OH,
SC-SPAC, SPAC, & SPAC-SS)

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2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/2/03

5 Full name of contributor

☐ out-of-state PAC (ID#)

Beer Alliance of Texas PAC

6 Contributor address; City; State; Zip Code

1300 Guadalupe St #204A
Austin, TX 787017 Amount of
contribution (\$)

250.00

8 In-kind contribution
description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

4/9/03

Full name of contributor

☐ out-of-state PAC (ID#)

Arthur Gochman

Contributor address; City; State; Zip Code

1800 N Mason Road
Katy, TX 77449Amount of
contribution (\$)

1,000.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

4/14/03

Full name of contributor

☐ out-of-state PAC (ID#)

James G. Lifshutz

Contributor address; City; State; Zip Code

215 W Travis, San Antonio, TX 78205

Amount of
contribution (\$)

1,000.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

4/15/03

Full name of contributor

☐ out-of-state PAC (ID#)

Leopoldo V. Techuanhuey, M.D.

Contributor address; City; State; Zip Code

Rosa Verde Tower #801
San Antonio, TX 78205Amount of
contribution (\$)

100.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

4/4/03

Full name of contributor

☐ out-of-state PAC (ID#)

Vinson & Elkins Texas PAC

Contributor address; City; State; Zip Code

2300 First City Tower, Houston, TX 77002

Amount of
contribution (\$)

1,000.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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RECEIVED
CITY OF SAN ANTONIO
CITY CLERK

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1

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SC-SPAC, SPAC, & SPAC-SS)

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2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/24/03

5 Full name of contributor

☐ out-of-state PAC (ID#)

Brenda Vickrey Johnson

6 Contributor address; City; State; Zip Code

13055 N Hunters Cir, San Antonio, TX 78230

7 Amount of
contribution (\$)

500.00

8 In-kind contribution
description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

4/17/03

Full name of contributor

☐ out-of-state PAC (ID#)

Carter & Burgess Political Committee

Contributor address; City; State; Zip Code

911 Central Parkway N #425

San Antonio, TX 78283

Amount of
contribution (\$)

500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

4/16/03

Full name of contributor

☐ out-of-state PAC (ID#)

EDS PAC

Contributor address; City; State; Zip Code

1331 Pennsylvania Ave NW #1300 North

Washington, DC 20004

Amount of
contribution (\$)

1,000.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

4/19/03

Full name of contributor

☐ out-of-state PAC (ID#)

Alfonso Chiscano, M.D.

Contributor address; City; State; Zip Code

15243 Pebble Cove, San Antonio, TX 78232

Amount of
contribution (\$)

500.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

4/23/03

Full name of contributor

☐ out-of-state PAC (ID#)

San Antonio Realtors PAC, Non-Corporate

Contributor address; City; State; Zip Code

9110 IH 10W, San Antonio, TX 78230

Amount of
contribution (\$)

750.00

In-kind contribution
description (if applicable)

Principal occupation (Optional)

Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

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POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1

(FOR FORMS C/OH, C/OH-SS, SC-C/OH,
SC-SPAC, SPAC, & SPAC-SS)

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2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/22/03

5 Full name of contributor

☐ out-of-state PAC (ID#)

Jennifer B. Spencer

6 Contributor address; City; State; Zip Code

26610 Harmony Hills, San Antonio, TX 78258

7 Amount of contribution (\$)

1,000.00

8 In-kind contribution description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

4/24/03

Full name of contributor

☐ out-of-state PAC (ID#)

Wm. Kennon Vickrey

Contributor address; City; State; Zip Code

12940 Country Parkway
San Antonio, TX 78216

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

4/22/03

Full name of contributor

☐ out-of-state PAC (ID#)

Malcolm T Hartman

Contributor address; City; State; Zip Code

1250 N. E. Loop 410 #210-A
San Antonio, TX 78209

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

4/25/03

Full name of contributor

☐ out-of-state PAC (ID#)

I. B. E. W. - C. O. P. E.

Contributor address; City; State; Zip Code

1125 15th Street, NW
Washington, DC 20005

Amount of contribution (\$)

1,000.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

4/24/03

Full name of contributor

☐ out-of-state PAC (ID#)

Printice L. Gary

Contributor address; City; State; Zip Code

16304 Ranchita Drive
Dallas, TX 75248

Amount of contribution (\$)

1,000.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

If contributor is out-of-state PAC, please see instruction guide for additional reporting requirements.

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CITY OF SAN ANTONIO
CITY CLERK
2003 JUL 15 2:51 PM

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A1

(FOR FORMS C/OH, C/OH-SS, SC-C/OH,
SC-SPAC, SPAC, & SPAC-SS)

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5

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/26/03

5 Full name of contributor

R. David Kelly

☐ out-of-state PAC (ID#)

6 Contributor address; City; State; Zip Code

5485 Beltline #290

Dallas, TX 75240

7 Amount of contribution (\$)

1,000.00

8 In-kind contribution description (if applicable)

9 Principal occupation (Optional)

10 Employer (Optional)

Date

4/30/03

Full name of contributor

Neal Hildebrandt

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

1070 Eagles Landing Blvd.

Oak Point, TX 75068

Amount of contribution (\$)

1,000.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

4/23/03

Full name of contributor

Vulcan Materials Company PAC

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

P O Box 385014

Birmingham, AL 35238

Amount of contribution (\$)

500.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

4/25/03

Full name of contributor

Simon Falic

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

780 N.W. 42nd Avenue

Miami, Florida 33126

Amount of contribution (\$)

1,000.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

Date

7/07/03

Full name of contributor

William Worth

☐ out-of-state PAC (ID#)

Contributor address; City; State; Zip Code

6929 Camp Bullis Road

San Antonio, TX 78256

Amount of contribution (\$)

1,000.00

In-kind contribution description (if applicable)

Principal occupation (Optional)

Employer (Optional)

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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/29/03

5 Payee name

BFI Waste Services

7

Amount

(\$)

\$450.92

6 Payee address; City; State; Zip Code

P O Box 207910, San Antonio, TX 78220

8 Purpose of payment (See instructions regarding type of information required.)

Dumpster/Waste Services

9

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

4/29/03

Payee name

Anne Whittington

Payee address; City; State; Zip Code

8715 Starcrest Drive, San Antonio, TX 78217

Amount

(\$)

\$190.94

Purpose of payment (See instructions regarding type of information required.)

Reimbursements Office Supplies

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

4/29/03

Payee name

La.Prensa Newspaper

Payee address; City; State; Zip Code

318 S Flores, San Antonio, TX 78204

Amount

(\$)

\$300.00

Purpose of payment (See instructions regarding type of information required.)

Advertisement

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

4/29/03

Payee name

TTI-TPP

Payee address; City; State; Zip Code

3135 TAMU, College Station, TX 77843

Amount

(\$)

175.00

Purpose of payment (See instructions regarding type of information required.)

Transportation Planning Conference
Registration Fee

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/30/03

5 Payee name

Ritz Carlton Hotel

7

Amount

(\$)

\$51.08

6 Payee address;

City; State; Zip Code

150 22nd St NW, Washington DC

8 Purpose of payment (See instructions regarding type of information required.)

Travel

9

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

4/30/03

Payee name

Anne Whittington

Payee address;

City; State; Zip Code

8715 Starcrest Drive, San Antonio, TX 78217

Amount
(\$)

\$4,000.00

Purpose of payment (See instructions regarding type of information required.)

Salary

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

4/30/03

Payee name

Eva Neubert

Payee address;

City; State; Zip Code

1023 Avenue B #1, San Antonio, TX 78215

Amount
(\$)

\$20.00

Purpose of payment (See instructions regarding type of information required.)

Reimbursement -Office Supplies

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

4/30/03

Payee name

Esmerelda Rodriguez

Payee address;

City; State; Zip Code

15651 Chase Hill Blvd #508, San Antonio, TX 78256

Amount
(\$)

45.00

Purpose of payment (See instructions regarding type of information required.)

Salary

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

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CITY OF SAN ANTONIO
CITY CLERK
APR 15 PM 2:51

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

4/30/03

5 Payee name

Anne Whittington

6 Payee address; City; State; Zip Code

8715 Starcrest Dr., San Antonio, TX 78217

7

Amount
(\$)

4,000.00

8 Purpose of payment (See instructions regarding type of information required.)

Salary

9

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

4/30/03

Payee name

City of San Antonio

Payee address; City; State; Zip Code

P O Box 839975, San Antonio, TX 78283

Amount
(\$)

3.00

Purpose of payment (See instructions regarding type of information required.)

Telephone Reimbursement

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

4/30/03

Payee name

Eva Neubert

Payee address; City; State; Zip Code

1023 Avenue B #1, San Antonio, TX 78215

Amount
(\$)

131.84

Purpose of payment (See instructions regarding type of information required.)

Reimbursement Office Supplies

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

4/30/03

Payee name

Eva Neubert

Payee address; City; State; Zip Code

1023 Avenue B #1, San Antonio, TX 78215

Amount
(\$)

1,000.00

Purpose of payment (See instructions regarding type of information required.)

Salary

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

RECEIVED
CITY OF SAN ANTONIO
CITY CLERK
2003 JUL 15 PM 2:51

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5/1/03

5 Payee name

U.S. Postal Service

6 Payee address; City; State; Zip Code

Laurel Heights Station, San Antonio, TX 78212

7

Amount
(\$)

370.00

8 Purpose of payment (See instructions regarding type of information required.)

Postage

9

.. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name Office sought Office held

Date

5/1/03

Payee name

Blanco Beverage

Payee address; City; State; Zip Code

13281 Blanco, San Antonio, TX 78216

Amount
(\$)

448.35

Purpose of payment (See instructions regarding type of information required.)

Beverages

.. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name Office sought Office held

Date

5/1/03

Payee name

It's All About Flowers

Payee address; City; State; Zip Code

11705 Perrin Beitel #104, San Antonio, TX 78217

Amount
(\$)

29.11

Purpose of payment (See instructions regarding type of information required.)

Flowers

.. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name Office sought Office held

Date

5/2/03

Payee name

Esmerelda Rodrigues

Payee address; City; State; Zip Code

15651 Chase Hill Blvd #508, San Antonio, TX 78256

Amount
(\$)

13.11

Purpose of payment (See instructions regarding type of information required.)

Reimbursement for Office Supplies

.. Complete if direct expenditure to benefit C/OH ..
Candidate / Officeholder name Office sought Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5/2/03

5 Payee name

G & M Company, LLC

7

Amount
(\$)

3,200.00

6 Payee address; City; State; Zip Code

729 E Woodlawn Avenue, San Antonio, TX 78212

8 Purpose of payment (See instructions regarding type of information required.)

Consulting

9 -- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Date

5/2/03

Payee name

Anne Whittington

Payee address; City; State; Zip Code

8715 Starcrest Drive, San Antonio, TX 78217

Amount
(\$)

350.00

Purpose of payment (See instructions regarding type of information required.)

Reimbursement of Expenses

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Date

5/2/03

Payee name

Anne Whittington

Payee address; City; State; Zip Code

8715 Starcrest Drive, San Antonio, TX 78217

Amount
(\$)

75.00

Purpose of payment (See instructions regarding type of information required.)

Reimbursement of Expenses

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Date

5/3/03

Payee name

Office Max

Payee address; City; State; Zip Code

1604 Bandara, San Antonio, TX 78828

Amount
(\$)

77.64

Purpose of payment (See instructions regarding type of information required.)

Office Supplies

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

2003 JUL 15 PM 2:51

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7

Amount (\$)

5/3/03

Absolutely Catering

6 Payee address; City; State; Zip Code

P O Box 10391, San Antonio, TX 78210

2,399.30

8 Purpose of payment (See instructions regarding type of information required.)

Catering Food

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

5/3/03

Ruben Alfaro

Payee address; City; State; Zip Code

203 Upton, San Antonio, TX 78212

Amount (\$)

150.00

Purpose of payment (See instructions regarding type of information required.)

Photography

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

5/6/03

Biga On The Banks

Payee address; City; State; Zip Code

203 S St Mary's, San Antonio, TX 78205

Amount (\$)

435.28

Purpose of payment (See instructions regarding type of information required.)

Dining

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

5/6/03

Plaza Club

Payee address; City; State; Zip Code

2100 Frost Bank Tower, San Antonio, TX 78205

Amount (\$)

393.63

Purpose of payment (See instructions regarding type of information required.)

Membership/Dining

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

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POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5/6/03

5 Payee name

Suchy's Flowers

6 Payee address; City; State; Zip Code

955 Cincinnati Avenue, San Antonio, TX 78201

7

Amount
(\$)

319.29

8 Purpose of payment (See instructions regarding type of information required.)

Flowers

9

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

5/6/03

Payee name

SBC

Payee address; City; State; Zip Code

P O Box 4844, Houston, TX 77097

Amount
(\$)

142.90

Purpose of payment (See instructions regarding type of information required.)

Utilities: Telephone

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

5/6/03

Payee name

Security One

Payee address; City; State; Zip Code

P O Box 23280, San Antonio, TX 78223

Amount
(\$)

26.97

Purpose of payment (See instructions regarding type of information required.)

Bldg. Security

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

5/6/03

Payee name

Alamo Travel Group

Payee address; City; State; Zip Code

9000 Wurzbach Road, San Antonio, TX 78240

Amount
(\$)

480.00

Purpose of payment (See instructions regarding type of information required.)

Travel

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES

SCHEDULE F

2003 JUL 15 PM 2:51

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:
23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7

Amount
(\$)

5/6/03

Cingular Wireless

102.73

6 Payee address; City; State; Zip Code

P O Box 4460, Houston, TX 77097

8 Purpose of payment (See instructions regarding type of information required.)

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Telephone

Date

Payee name

5/6/03

S A Police Department

Amount
(\$)
25.00

Payee address; City; State; Zip Code

P O Box 839966, San Antonio, TX 78283

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Alarm Fee

Date

Payee name

5/6/03

Abby Rental

Amount
(\$)
675.38

Payee address; City; State; Zip Code

8715 Starcrest #3, San Antonio, TX 78218

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Furniture Rental

Date

Payee name

5/6/03

Mungia Printers

Amount
(\$)
242.72

Payee address; City; State; Zip Code

2201 Buena Vista Street, San Antonio, TX 78207

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Printing and Reproduction

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POLITICAL EXPENDITURES

SCHEDULE F

2003 JUL 15 PM 2:51

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7

Amount
(\$)

5/6/03

PolitiCo

6 Payee address; City; State; Zip Code

835 W. Woodlawn, San Antonio, TX 78212

2,000.00

8 Purpose of payment (See instructions regarding type of information required.)

Consulting

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount
(\$)

5/6/03

Eva Neubert

Payee address; City; State; Zip Code

1023 Avenue B #1, San Antonio, TX 78215

66.89

Purpose of payment (See instructions regarding type of information required.)

Reimbursement Office Supplies

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount
(\$)

5/8/03

PolitiCo

Payee address; City; State; Zip Code

835 W Woodlawn, San Antonio, TX 78212

3,000.00

Purpose of payment (See instructions regarding type of information required.)

Consulting

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount
(\$)

5/8/03

Esmenelda Rodriguez

Payee address; City; State; Zip Code

15651 Chase Hill Blvd #508, San Antonio, TX 78256

108.00

Purpose of payment (See instructions regarding type of information required.)

Salary

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

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POLITICAL EXPENDITURES

SCHEDULE F

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CITY OF SAN ANTONIO
CITY CLERK
2003 JUL 15 PM 2:51

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5/8/03

5 Payee name

Texas Recharge & Toner Inc.

6 Payee address; City; State; Zip Code

4234 Center Gare, San Antonio, TX 78217

7

Amount (\$)

105.66

8 Purpose of payment (See instructions regarding type of information required.)

Office Supplies

9 .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

5/10/03

Payee name

Doubletree Hotel

Payee address; City; State; Zip Code

Houston, Texas

Amount (\$)

239.98

Purpose of payment (See instructions regarding type of information required.)

Travel

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

5/12/03

Payee name

Ruben Alfaro

Payee address; City; State; Zip Code

203 Upton, San Antonio, TX 78212

Amount (\$)

40.00

Purpose of payment (See instructions regarding type of information required.)

Photography

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

5/13/03

Payee name

Alamo Travel Group

Payee address; City; State; Zip Code

9000 Wurzbach Road, San Antonio, TX 78240

Amount (\$)

359.00

Purpose of payment (See instructions regarding type of information required.)

Travel

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

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CITY OF SAN ANTONIO
CITY CLERK
SCHEDULE F

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POLITICAL EXPENDITURES

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1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7

Amount
(\$)

5/14/03

Intercontinental Hotel

171.87

6 Payee address; City; State; Zip Code

2222 W Loop S, Houston, TX 77027

8 Purpose of payment (See instructions regarding type of information required.)

Travel

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount
(\$)

5/13/03

Eva Neubert

122.44

Payee address; City; State; Zip Code

1023 Avenue B #1, San Antonio, TX 78215

Purpose of payment (See instructions regarding type of information required.)

Reimbursement Office Expenses

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount
(\$)

5/15/03

Alamo Travel Group

205.00

Payee address; City; State; Zip Code

9000 Wurzbach Road, San Antonio, TX 78240

Purpose of payment (See instructions regarding type of information required.)

Travel

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

Amount
(\$)

5/15/03

Alamo Travel Group

690.50

Payee address; City; State; Zip Code

9000 Wurzbach Road, San Antonio, TX 78249

Purpose of payment (See instructions regarding type of information required.)

Travel

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

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POLITICAL EXPENDITURES

SCHEDULE F

2003 JUL 15 PM 2:52

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7

Amount (\$)

5/19/03

Money Mailer

6 Payee address; City; State; Zip Code

376.75

255 Claywell Dr #1, San Antonio, TX 78209

8 Purpose of payment (See instructions regarding type of information required.)

Printing and Reproduction

9

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

5/19/03

C. P. S.

Payee address; City; State; Zip Code

Amount (\$)

13.93

P O Box 2678, San Antonio, TX 78289

Purpose of payment (See instructions regarding type of information required.)

Utilities

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

5/21/03

Crescent Court

Payee address; City; State; Zip Code

Amount (\$)

448.50

400 Crescent Ct, Dallas, TX

Purpose of payment (See instructions regarding type of information required.)

Travel

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

5/24/03

Esmerelda Rodriguez

Payee address; City; State; Zip Code

Amount (\$)

114.00

15651 Chase Hill Blvd #508, San Antonio, TX 78256

Purpose of payment (See instructions regarding type of information required.)

Salary

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

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POLITICAL EXPENDITURES**SCHEDULE F**

2003 JUL 15 PM 2:52

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5/24/03

5 Payee name

Esmerelda Rodriguez

7

Amount
(\$)

15.07

6 Payee address; City; State; Zip Code

15651 Chase Hill Blvd #508, San Antonio, TX 78256

8 Purpose of payment (See instructions regarding type of information required.)

Reimbursement Office Supplies

9

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

5/24/03

Payee name

Time Warner Cable

Amount
(\$)

269.65

Payee address; City; State; Zip Code

P O Box 850734, Dallas, TX 75265

Purpose of payment (See instructions regarding type of information required.)

Utilities

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

5/24/03

Payee name

SBC

Amount
(\$)

46.96

Payee address; City; State; Zip Code

P O Box 4844, Houston, TX 77097

Purpose of payment (See instructions regarding type of information required.)

Telephone

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

5/27/03

Payee name

Hilton Hotel

Amount
(\$)

\$767.64

Payee address; City; State; Zip Code

Las Vegas, Nevada

Purpose of payment (See instructions regarding type of information required.)

Travel

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

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POLITICAL EXPENDITURES

SCHEDULE F

2003 JUL 15 PM 2: 52

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

5/28/03

Omni Mandalay Hotel

7

Amount (\$)

211.49

6 Payee address; City; State; Zip Code

Irving, Texas

8 Purpose of payment (See instructions regarding type of information required.)

Travel

9 -- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

5/28/03

Pete Cortez

Amount (\$)

150.00

Payee address; City; State; Zip Code

218 Produce, San Antonio, TX 78207

Purpose of payment (See instructions regarding type of information required.)

Reimbursement

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

5/28/03

Our Saviour Lutheran School

Amount (\$)

100.00

Payee address; City; State; Zip Code

11503 Vance Jackson, San Antonio, TX 78230

Purpose of payment (See instructions regarding type of information required.)

Charity/D. Krueger Memorial

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

5/29/93

Esmerelda Rodriguez

Amount (\$)

120.00

Payee address; City; State; Zip Code

15651 Chase Hill Blvd #508, San Antonio, TX 78258

Purpose of payment (See instructions regarding type of information required.)

Salary

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

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CITY CLERK

POLITICAL EXPENDITURES

SCHEDULE F

2003 JUL 15 PM 2:52

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:
23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

5/29/03

Eva Neubert

7

Amount
(\$)

1,000.00

6 Payee address; City; State; Zip Code

1023 Avenue B #1, San Antonio, TX 78215

8 Purpose of payment (See instructions regarding type of information required.)

Salary

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

Payee name

6/2/03

Our Lady of the Lake Univeristy

Amount
(\$)

50.00

Payee address; City; State; Zip Code

411 SW 24th Street, San Antonio, TX 78207

Purpose of payment (See instructions regarding type of information required.)

Charity/Donation Campus Activities

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

Payee name

6/2/03

PolitiCo

Amount
(\$)

500.00

Payee address; City; State; Zip Code

835 W Woodlawn, San Antonio, TX 78212

Purpose of payment (See instructions regarding type of information required.)

Consulting

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date

Payee name

6/2/03

Monarch Trophy Studio

Amount
(\$)

100.44

Payee address; City; State; Zip Code

2121 NW Military Hwy, San Antonio, TX 78213

Purpose of payment (See instructions regarding type of information required.)

Office Supplies

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

2003 JUL 15 PM 2:52

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

6/5/03

5 Payee name

Steven Schauer

7

Amount

(\$)

200.64

6 Payee address; City; State; Zip Code

P O Box 839966, San Antonio, TX 78283

8 Purpose of payment (See instructions regarding type of information required.)

Reimbursement Office Supplies

9 .. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

6/6/03

Payee name

Esmerelda Rodriguez

Payee address; City; State; Zip Code

15651 Chase Hill Blvd #508, San Antonio, TX 78256

Amount (\$)

126.00

Purpose of payment (See instructions regarding type of information required.)

Salary

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

6/6/03

Payee name

Esmerelda Rodriguez

Payee address; City; State; Zip Code

15651 Chase Hill Blvd., San Antonio, TX 78256

Amount (\$)

20.98

Purpose of payment (See instructions regarding type of information required.)

Reimbursement Office Supplies

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

Date

6/9/03

Payee name

Melissa Havrda

Payee address; City; State; Zip Code

9055 Foxgrove Way, San Antonio, TX 78251

Amount (\$)

85.07

Purpose of payment (See instructions regarding type of information required.)

Reimbursement Office Supplies

.. Complete if direct expenditure to benefit C/OH ..

Candidate / Officeholder name

Office sought

Office held

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POLITICAL EXPENDITURES

SCHEDULE F

2003 JUL 15 PM 2:52

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1 Total pages Schedule F:
23

2 FILER NAME
EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date
6/9/03

5 Payee name

Frost Bank

6 Payee address; City; State; Zip Code
P O Box 1600, San Antonio, TX 78296

7 Amount (\$)
4.00

8 Purpose of payment (See instructions regarding type of information required.)

Service Charge

9 ** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date
7/9/03

Payee name

Cavender Properties

Payee address; City; State; Zip Code
215 W Travis, San Antonio, TX 78205

Amount (\$)
1,500.00

Purpose of payment (See instructions regarding type of information required.)

Rent

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date
7/9/03

Payee name

Cingular Wireless

Payee address; City; State; Zip Code
P O Box 659574, Dallas, TX 75265

Amount (\$)
190.34

Purpose of payment (See instructions regarding type of information required.)

Telephone

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

Date
6/9/03

Payee name

Sprint PCS

Payee address; City; State; Zip Code
P O Box 219554, Kansas City, MO 64121

Amount (\$)
274.68

Purpose of payment (See instructions regarding type of information required.)

Telephone

** Complete if direct expenditure to benefit C/OH **
Candidate / Officeholder name Office sought Office held

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POLITICAL EXPENDITURES

SCHEDULE F

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CITY CLERK

2003 JUL 15 PM 2:52

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1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7

Amount
(\$)

6/9/03

Suchy's Flowers

6 Payee address; City; State; Zip Code

955 Cincinnati Avenue, San Antonio, TX 78201

84.68

8 Purpose of payment (See instructions regarding type of information required.)

Flowers

9 -- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

6/9/03

Quintana For Senate

Payee address; City; State; Zip Code

P O Box 827, Newark, NJ 07101

Amount
(\$)

250.00

Purpose of payment (See instructions regarding type of information required.)

Campaign Contribution

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Luis Quintana

U S Senate

City Council

Date

Payee name

6/9/03

C.P.S.

Payee address; City; State; Zip Code

P O Box 2678, San Antonio, TX 78289

Amount
(\$)

249.73

Purpose of payment (See instructions regarding type of information required.)

Utilities

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

6/9/03

CPS

Payee address; City; State; Zip Code

P O Box 2678, San Antonio, TX 78289

Amount
(\$)

33.14

Purpose of payment (See instructions regarding type of information required.)

Utilities

-- Complete if direct expenditure to benefit C/OH --

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F**

2003 JUL 15 PM 2:52

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1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7

Amount
(\$)

6/9/03

Security One

6 Payee address; City; State; Zip Code

26.97

P O Box 23289, San Antonio, TX 78223

8 Purpose of payment (See instructions regarding type of information required.)

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Building Security

Date

Payee name

6/9/03

Plaza Club

Payee address; City; State; Zip Code

Amount
(\$)

171.98

2100 Frost Bank Tower, San Antonio, TX 78205

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Membership Fees/Dining

Date

Payee name

6/11/03

Eva Neubert

Payee address; City; State; Zip Code

Amount
(\$)

16.91

1023 Avenue B #1, San Antonio, TX 78215

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Reimbursement Office Supplies

Date

Payee name

6/11/03

Cingular

Payee address; City; State; Zip Code

Amount
(\$)

500.08

P O Box 650574, Dallas, TX 75265

Purpose of payment (See instructions regarding type of information required.)

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Telephone

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POLITICAL EXPENDITURES

SCHEDULE F

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1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

6/11/03

5 Payee name

Postmaster

7

Amount
(\$)
68.00

6 Payee address; City; State; Zip Code

2400 McCullough Avenue, San Antonio, TX 78212

8 Purpose of payment (See instructions regarding type of information required.)

Postage

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

6/11/03

Payee name

SAAHJ Scholarship Fund

Payee address; City; State; Zip Code

P O Box 1576, San Antonio, TX 78297

Amount
(\$)
250.00

Purpose of payment (See instructions regarding type of information required.)

Donation

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

6/11/03

Payee name

SA Mustangs/AAU Basketball

Payee address; City; State; Zip Code

2018 Bruni Street
San Antonio, TX 78224

Amount
(\$)
300.00

Purpose of payment (See instructions regarding type of information required.)

Sponsor Team AAU Trip

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

6/11/03

Payee name

Jefferson Area Community Outreach

Payee address; City; State; Zip Code

201 Meredith Drive, San Antonio, TX 78228

Amount
(\$)
50.00

Purpose of payment (See instructions regarding type of information required.)

Donation Senior Program

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

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CITY OF SAN ANTONIO
CITY CLERK

SCHEDULE F

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1 Total pages Schedule F:
23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7

Amount
(\$)

6/23/03

Cavender Properties

1,500.00

6 Payee address; City; State; Zip Code

215 W Travis, San Antonio, TX 78205

8 Purpose of payment (See instructions regarding type of information required.)

Rent

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

6/23/93

Cavender Properties

Amount
(\$)

1,500.00

Payee address; City; State; Zip Code

215 W Travis, San Antonio, TX 78205

Purpose of payment (See instructions regarding type of information required.)

Rent

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

6/24/03

G & M Company, LLC

Amount

3,200.00

Payee address; City; State; Zip Code

729 E Woodlawn Avenue, San Antonio, TX 78212

Purpose of payment (See instructions regarding type of information required.)

Consulting

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

6/24/03

Cingular Wireless

Amount
(\$)

350.00

Payee address; City; State; Zip Code

P O Box 650574, Dallas, TX 75265

Purpose of payment (See instructions regarding type of information required.)

Telephone

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

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CITY OF SAN ANTONIO
CITY CLERK

POLITICAL EXPENDITURES**SCHEDULE F**

2003 JUL 15 PM 2:52

The INSTRUCTION GUIDE explains how to complete this form.

1 Total pages Schedule F:

23

2 FILER NAME

EDWARD GARZA

3 ACCOUNT # (Ethics Commission filers)

4 Date

5 Payee name

7

Amount
(\$)

6/24/03

S.B.C.

6 Payee address; City; State; Zip Code

P O Box 4844, Houston, TX 77097

46.96

8 Purpose of payment (See instructions regarding type of information required.)

Telephone

9 ** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

6/24/03

Time Warner Cable

Payee address; City; State; Zip Code

P O Box 650734, Dallas, TX 75265

Amount
(\$)

164.66

Purpose of payment (See instructions regarding type of information required.)

Utilities

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

6/24/03

San Antonio AFL-CIO

Payee address; City; State; Zip Code

311 S St Mary's St #15E, San Antonio, TX 78205

Amount
(\$)

135.00

Purpose of payment (See instructions regarding type of information required.)

Advertising/Directory

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

Date

Payee name

6/26/03

Eva Neubert

Payee address; City; State; Zip Code

1023 Avenue B #1, San Antonio, TX 78215

Amount
(\$)

1,000.00

Purpose of payment (See instructions regarding type of information required.)

Salary

** Complete if direct expenditure to benefit C/OH **

Candidate / Officeholder name

Office sought

Office held

ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED

POLITICAL EXPENDITURES**SCHEDULE F**

2003 JUL 15 PM 2:52

The INSTRUCTION GUIDE explains how to complete this form.		1 Total pages Schedule F: 23	
2 FILER NAME EDWARD GARZA		3 ACCOUNT # (Ethics Commission filers)	
4 Date 6/26/03	5 Payee name Alamo Travel Group 6 Payee address; City; State; Zip Code 9000 Wurzbach, San Antonio, TX 78250	7	Amount (\$) 361.50
8 Purpose of payment (See instructions regarding type of information required.) Travel		9 ** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 6/26/03	Payee name Eva Neubert Payee address; City; State; Zip Code 1023 Avenue B #1, San Antonio, TX 78215		Amount (\$) \$10.00
Purpose of payment (See instructions regarding type of information required.) Reimbursement/Office Supplies		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date 6/26/03	Payee name Security One Payee address; City; State; Zip Code P O Box 23280 San Antonio, TX 78223		Amount (\$) \$26.97
Purpose of payment (See instructions regarding type of information required.)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
Date	Payee name Payee address; City; State; Zip Code		Amount (\$)
Purpose of payment (See instructions regarding type of information required.)		** Complete if direct expenditure to benefit C/OH ** Candidate / Officeholder name Office sought Office held	
ATTACH ADDITIONAL COPIES OF THIS FORM AS NEEDED			

